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** CONTINUING DATA *****

none

** FOREIGN APPLICATIONS *****

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
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Examiner's Signature <i>[Signature]</i>	Initials			

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TITLE

NEW TAXOIDS, THEIR PREPARATION AND PHARMACEUTICAL COMPOSITION CONTAINING THEM

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED -74		<input type="checkbox"/> 1.16 Fees (Filing)
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